



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1211

<b>SERIAL NUMBER</b> 10/553,327	<b>FILING OR 371(c) DATE</b> 10/14/2005 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> PHNL030372US	
<b>APPLICANTS</b> Wilhelmus Reinerius Maria Mens, Eindhoven, NETHERLANDS; <b>** CONTINUING DATA *****</b> <i>en</i> This application is a 371 of PCT/IB04/50394 04/05/2004 <b>** FOREIGN APPLICATIONS *****</b> <i>en</i> EUROPEAN PATENT OFFICE (EPO) 03100997.0 04/14/2003 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/01/2006</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>en</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 1/3	<b>INDEPENDENT CLAIMS</b> 2/5
<b>ADDRESS</b> 38107					
<b>TITLE</b> Magnetic resonance imaging with histogram-based phase correction					
<b>FILING FEE RECEIVED</b> 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		